

**Medicare Short-Stay Hospital Utilization  
Selected Fiscal Years**

	1990	1998	1999	2000	2001	2002
<b>Discharges</b>						
Total in millions	10.5	11.9	11.7	11.8	12.2	12.5
Rate per 1,000 Enrollees <sup>1</sup>	313	319	310	303	310	314
<b>Days of Care</b>						
Total in millions	94	74	71	71	73	74
Rate per 1,000 Enrollees <sup>1</sup>	2,805	1,972	1,897	1,825	1,846	1,860
<b>Average Length of Stay</b>						
All short-stay	9.0	6.2	6.1	6.0	6.0	5.9
Excluded Units <sup>2</sup>	19.5	12.9	12.6	12.3	12.0	11.7
<b>Total Charges per Day</b>	<b>\$1,060</b>	<b>\$2,332</b>	<b>\$2,496</b>	<b>\$2,720</b>	<b>\$3,027</b>	<b>\$3,506</b>

<sup>1</sup> The population base is HI enrollment excluding HI enrollees residing in foreign countries and should be treated as preliminary.

<sup>2</sup> Includes alcohol/drug, psychiatric, and rehabilitation units through 1990, and psychiatric and rehabilitation units from 1997 through 2002.

NOTES: Data may reflect under reporting due to a variety of reasons including: operational difficulties experienced by intermediaries; no-pay, at-risk managed care utilization; and no-pay Medicare secondary payer bills. Average length of stay is shown in days. The data for 1990 through 2002 are based on 100 percent MEDPAR. Data may differ from other sources or from the same source with different update cycle.

SOURCE: CMS/OIS

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